

CAHPS[®] 3.0

**Child Supplemental
Questions**

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HEALTH PLAN

Replace Q-3 of the CAHPS 3.0 Child Commercial Questionnaire with HP1

HP1. How many months or years in a row has your child been in this health plan?

- ¹ ☐ Less than 1 year
- ² ☐ At least 1 year but less than 2 years
- ³ ☐ At least 2 years but less than 5 years
- ⁴ ☐ At least 5 years but less than 10 years
- ⁵ ☐ 10 years or more

COMMUNICATION

Insert C1 and C2 after Q-32 in "Your Child's Health Care in the Last 12 Months" section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as "In the Last 6 Months"

C1 -- For Medicare, the response category "My child had no visits in the last 12 months" should be added following "Always"

C1. In the last 12 months, how often did you have a hard time speaking with or understanding your child's doctors or other health providers because you spoke different languages?

- ¹ ☐ Never
- ² ☐ Sometimes
- ³ ☐ Usually
- ⁴ ☐ Always

Insert C2 after Q-35 in "Your Child's Health Care in the Last 12 Months" section of the CAHPS 3.0 Child Commercial Questionnaire

C2 -- For Medicare, the response category "My child had no visits in the last 12 months, or my child is not able to speak to health providers" should be added following "Always"

C2. In the last 12 months, how often did your child have a hard time speaking with or understanding doctors or other health providers because they spoke different languages?

- ¹ ☐ Never
- ² ☐ Sometimes
- ³ ☐ Usually
- ⁴ ☐ Always

INTERPRETER

Insert I1 to I4 after Q-47 in "Your Child's Health Care in the Last 12 Months" section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as "In the Last 6 Months"

- I1. An interpreter is someone who repeats or signs what one person says in a language used by another person.**

In the last 12 months, did you need an interpreter to help you speak with your child's doctors or other health providers?

¹ ☐ Yes

² ☐ No → **Go to Question 48 of the CAHPS 3.0 Child Commercial Questionnaire**

I2 and I4 -- For Medicare, the response category "My child had no visits in the last 12 months or I didn't need an interpreter in the last 12 months" should be added following "Always"

- I2. In the last 12 months, when you needed an interpreter to help you speak with your child's doctors or other health providers, how often did you get one?**

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

- I3. In the last 12 months, did your child need an interpreter to help him or her speak with doctors or other health providers?**

¹ ☐ Yes

² ☐ No → **Go to Question 48 of the CAHPS 3.0 Child Commercial Questionnaire**

- I4. In the last 12 months, when your child needed an interpreter to help him or her speak with doctors or other health providers, how often did he or she get one?**

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

INTERPRETER

*Insert I1 to I2 after Q-93 in “Your Child’s Health Care in the Last 12 Months”
section of the CAHPS 3.0 Child Commercial Questionnaire*

I1. What language do you mainly speak at home?

- ¹ ☐ Language 1
- ² ☐ Language 2
- ³ ☐ Language 3
- ⁴ ☐ Language 4

I2. What language does your child mainly speak at home?

- ¹ ☐ Language 1
- ² ☐ Language 2
- ³ ☐ Language 3
- ⁴ ☐ Language 4

DENTAL CARE

Insert D1 to D3 after Q-61 in "Your Child's Health Care in the Last 12 Months" section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as "In the Last 6 Months"

D1. In the last 12 months, did your child get care from a dentist's office or dental clinic?

¹ ☐ Yes

² ☐ No → If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire

D2. In the last 12 months, how many times did your child go to a dentist's office or dental clinic?

⁰ ☐ None → If None, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire

¹ ☐ 1

² ☐ 2

³ ☐ 3

⁴ ☐ 4

⁵ ☐ 5 to 9

⁶ ☐ 10 or more

D3 -- For Medicare, the response category "My child didn't have any dental care in the last 12 months" should be added following "10 Best dental care possible"

D3. Using any number from 0 to 10 where 0 is the worst dental care possible and 10 is the best dental care possible, what number would you use to rate all your child's dental care in the last 12 months?

⁰ ☐ 0 Worst dental care possible

¹ ☐ 1

² ☐ 2

³ ☐ 3

⁴ ☐ 4

⁵ ☐ 5

⁶ ☐ 6

⁷ ☐ 7

⁸ ☐ 8

⁹ ☐ 9

¹⁰ ☐ 10 Best dental care possible

CHRONIC CONDITIONS

The Chronic Conditions questions have been revised by FACCT and are included in the CAHPS 3.0 Child Surveys. Remember to remove the highlighting prior to fielding the Child survey. Should you decide to omit the Chronic Conditions questions, simply delete the highlighted items and re-number.

SPECIALIZED SERVICES

Insert SS1 to SS2 after Q-61 in the "Specialized Services" section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as "In the Last 6 Months"

SS1. Home health care services can include home nursing, or help with feeding, bathing, or dressing your child.

In the last 12 months, did you need someone to come into your home to give home health care or assistance for your child?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire**

SS2. In the last 12 months, how much of a problem, if any, was it to get these home health services for your child through your child's health plan?

¹ ☐ A big problem

² ☐ A small problem

³ ☐ Not a problem

TRANSPORTATION

Insert T1 to T3 after Q-68 in "Your Child's Health Plan" section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as "In the Last 6 Months"

- T1. Some health plans help with transportation for your child to doctors' offices or clinics. This help can be a shuttle bus, tokens or vouchers for a bus or taxi, or payments for mileage.**

In the last 12 months did you call your child's health plan to get help with transportation for your child?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 69 of the CAHPS 3.0 Child Commercial Questionnaire**

T2 -- For Medicare, the response category "I didn't need help with transportation for my child in the last 12 months" should be added following "Always"

- T2. In the last 12 months, when you called to get help with transportation from your child's health plan, how often did you get it?**

¹ ☐ Never → **If Never, Go to Question 69 of the CAHPS 3.0 Child Commercial Questionnaire**

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

T3 -- For Medicare, the response category "I didn't need help with transportation for my child in the last 12 months" should be added following "Always"

- T3. In the last 12 months, how often did the help with transportation for your child meet your needs?**

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

REFERRALS

Insert R1 before Q-13 in “Getting Health Care from a Specialist” section of the CAHPS 3.0 Child Commercial Questionnaire

For Medicaid, reference period should be stated as “In the Last 6 Months”

R1 – For Medicare, the response category “I didn’t need to see a specialist in the last 12 months” should be added following “Not a problem”

R1. In the last 12 months, how much of a problem, if any, was it to get a referral to a specialist that your child needed to see?

- ¹ ☐ A big problem
- ² ☐ A small problem
- ³ ☐ Not a problem

CLAIMS PROCESSING

Insert CP1 to CP4 before Q-62 in "Your Child's Health Plan" section of the CAHPS 3.0 Child Commercial Questionnaire

CP1. Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for your child.

In the last 12 months, did you or anyone else send in any claims to your child's health plan?

¹ ☐ Yes

² ☐ No → If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire

☐ Don't Know → If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire

CP2 -- For Medicare, the response category "No claims were sent to my child's health plan in the last 12 months" should be added following "Don't know"

CP2. In the last 12 months, how often did the health plan handle your child's claims in a reasonable time?

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

☐ Don't Know

CP3 -- For Medicare, the response category "No claims were sent to my child's health plan in the last 12 months" should be added following "Don't know"

CP3. In the last 12 months, how often did the health plan handle your child's claims correctly?

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

☐ Don't Know

CLAIMS PROCESSING (continued)

CP4 -- For Medicare, the response category "No claims were sent to my child's health plan in the last 12 months" should be added following "Don't know"

CP4. In the last 12 months, before your child went for care, how often did the health plan make it clear how much you would have to pay?

- ¹ ☐ Never
- ² ☐ Sometimes
- ³ ☐ Usually
- ⁴ ☐ Always
- ☐ Don't Know

MEDICAID ENROLLMENT

Insert ME1 to ME4 before Q-62 in “Your Child’s Health Plan” section of the CAHPS 3.0 Child Commercial Questionnaire

ME1. Some states pay health plans to care for people covered by {Medicaid/State name for Medicaid}. With these health plans, you may have to choose your child’s doctor from the plan list or take your child to a clinic or health care center on the plan list.

Is your child covered by a health plan like this?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire**

ME2. Did you choose your child’s health plan or were you told which plan your child was in?

¹ ☐ I chose my child’s plan.

² ☐ I was told which plan my child was in.

ME3. You can get information about your child’s plan services in writing, by telephone, on the Internet, or in-person.

Did you get any information about your child’s health plan before you signed him or her up for it?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 62 of the CAHPS 3.0 Child Commercial Questionnaire**

ME4. How much of the information you were given before you signed up for the plan was correct?

¹ ☐ All of it

² ☐ Most of it

³ ☐ Some of it

⁴ ☐ None of it

COVERED BY MULTIPLE PLANS

Insert MP1 after Q-3 of the CAHPS 3.0 Child Commercial Questionnaire

MP1. Not counting dental insurance, is your child covered by any other health plan?

¹ ☐ Yes

² ☐ No

WELL CHILD CARE

Insert WC1 to WC4 after Q-47 in "Your Child's Health Care in the Last 12 Months" section of the CAHPS 3.0 Child Commercial Questionnaire

Questions WC1-WC4 are to be asked of children age 2 or younger

WC1. Is your child 2 years old or younger?

¹ ☐ Yes

² ☐ No → If No, Go To Question 48 of the CAHPS 3.0 Child Commercial Questionnaire

WC2. Reminders from the doctor's office or clinic or from the health plan can come to you by mail, by telephone, or in-person during a visit.

After your child was born, did you get any reminders to bring him or her in for a check-up to see how he or she was doing or for shots or drops?

¹ ☐ Yes

² ☐ No

WC3. Since your child was born, has he or she gone to a doctor or other health provider for a check-up to see how he or she was doing or for shots or drops?

¹ ☐ Yes

² ☐ No → If No, Go To Question 48 of the CAHPS 3.0 Child Commercial Questionnaire

WC4. Did you get an appointment for your child's first visit to a doctor or other health provider for a check-up, or for shots or drops, as soon as you wanted?

¹ ☐ Yes

² ☐ No

HEDIS SET

Insert H1 after Q-20 in “Your Child’s Health Care In The Last 12 Months” section of the CAHPS 3.0 Child Commercial Questionnaire

H1 – For Medicare, the response category “My child didn’t need care right away for an illness, injury, or condition in the last 12 months” should be added following “15 days or longer”

H1. In the last 12 months, when your child needed care right away for an illness, injury or condition, how long did your child usually have to wait between trying to get care and actually seeing a provider?

- ¹ ☐ Same day
- ² ☐ 1 day
- ³ ☐ 2 days
- ⁴ ☐ 3 days
- ⁵ ☐ 4-7 days
- ⁶ ☐ 8-14 days
- ⁷ ☐ 15 days or longer

Insert H2 after Q-22 in “Your Child’s Health Care In The Last 12 Months” section of the CAHPS 3.0 Child Commercial Questionnaire

H2 – For Medicare, the response category “My child didn’t need an appointment for health care in the last 12 months” should be added following “31 days or longer”

H2. In the last 12 months, not counting the times your child needed health care right away, how many days did your child usually have to wait between making an appointment and actually seeing a provider?

- ¹ ☐ Same day
- ² ☐ 1 day
- ³ ☐ 2-3 days
- ⁴ ☐ 4-7 days
- ⁵ ☐ 8-14 days
- ⁶ ☐ 15-30 days
- ⁷ ☐ 31 days or longer

*Insert H3 to H6 before Q-62 in the “Your Health Plan” Section of the
CAHPS 3.0 Child Commercial Questionnaire*

H3. Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you. In the last 12 months, did you or anyone else send in any claims to your health plan?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 62 of the CAHPS 3.0
Child Commercial Questionnaire**

☐ Don't know → **If Don't know, Go to Question 62 of the CAHPS 3.0
Child Commercial Questionnaire**

H4. In the last 12 months, how often did your health plan handle your claims in a reasonable time?

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

☐ Don't know

H5. In the last 12 months, how often did your health plan handle your claims correctly?

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

☐ Don't know

H6. In the last 12 months, before you went for care, how often did your health plan make it clear how much you would have to pay?

¹ ☐ Never

² ☐ Sometimes

³ ☐ Usually

⁴ ☐ Always

☐ Don't know

*Insert H7 to H10 after Q-65 in the “Your Child’s Health Plan” section
of the CAHPS 3.0 Child Commercial Questionnaire*

For Medicaid, reference period should be stated as “In the Last 6 Months”

H7. In the last 12 months, have you called or written to your child’s health plan with a complaint or problem?

¹ ☐ Yes

² ☐ No → **If No, Go to Question 66 of the CAHPS 3.0 Child Commercial Questionnaire**

H8. How long did it take for your child’s health plan to resolve your complaint?

¹ ☐ Same day

² ☐ 2-7 days

³ ☐ 8-14 days

⁴ ☐ 15-21 days

⁵ ☐ more than 21 days

⁶ ☐ I am still waiting for it to be settled. → **If Still Waiting, Go to Question H10 of the HEDIS Set**

H9 – For Medicare, the response categories “I am still waiting for it to be settled” and “I haven’t called or written with a complaint or problem in the last 12 months” should be added following “No”

H9. Was your complaint or problem settled to your satisfaction?

¹ ☐ Yes

² ☐ No

H10. How long have you been waiting for your health plan to resolve your complaint?

¹ ☐ 1-7 days

² ☐ 8-14 days

³ ☐ 15-21 days

⁴ ☐ More than 21 days